

## Section 4 – TOPICAL MODULES

### Part A – SELECTED FINANCIAL ASSETS

#### STATEMENT A → These next questions concern various assets.

ASK OR VERIFY –

- 1a. Did ... own any U.S. Savings Bonds as of** (Read last day of reference period?)  
(Type E or EE bonds only.)

8204

1 ☐ Yes

2 ☐ No – SKIP to Check Item T1

- b. What was the FACE VALUE of the U.S. Savings Bonds that ... owned?**

(If ownership was shared, count only ...'s share.)

8206

\$  .  00

X1 ☐ DK

X2 ☐ Ref.

#### CHECK ITEM T1

Interview status of ...'s spouse.

8208

1 ☐ No spouse in household – SKIP to 2c

2 ☐ Interview for spouse not yet conducted

3 ☐ Interview for spouse already conducted – SKIP to 2c

- 2a. As of** (Read last day of reference period), **did ... own jointly with ...'s (husband/wife) any checking accounts which did NOT earn interest?**

8209

1 ☐ Yes

2 ☐ No

X1 ☐ DK

X2 ☐ Ref.

} SKIP to 2c

- b. What is your best estimate of the amount of money ... and ...'s (husband/wife) had in those checking accounts as of** (Read last day of reference period?)

8210

\$  .  00

X3 ☐ None

X1 ☐ DK

X2 ☐ Ref.

- c. (Besides any checking accounts owned jointly with ...'s spouse,) as of** (Read last day of reference period), **did ... own any (other) checking accounts which did NOT earn interest?**

8232

1 ☐ Yes

2 ☐ No

X1 ☐ DK

X2 ☐ Ref.

} SKIP to Check Item T2

- d. What is your best estimate of the amount of money ... had in those checking accounts as of** (Read last day of reference period?)

(If account was shared, count only ...'s share.)

8233

\$  .  00

X3 ☐ None

X1 ☐ DK

X2 ☐ Ref.

#### CHECK ITEM T2

Refer to cc item 24.

Is ... 21 years of age or older?

8258

1 ☐ Yes

2 ☐ No – SKIP to Statement B, page 58

- 3a. Does ... have any Individual Retirement Accounts – any IRAs – in ...'s OWN name?**

(If ... is only included in spouse's IRA account, mark the "No" box.)

8260

1 ☐ Yes

2 ☐ No

X1 ☐ DK

X2 ☐ Ref.

} SKIP to 4a

- b. For how many years has ... contributed to ...'s IRA accounts?**

8262

Years

X1 ☐ DK

X2 ☐ Ref. – SKIP to 4a

- c. As of** (Read last day of reference period), **what is the total balance or market value (including interest earned) of ...'s IRA accounts?** ★

8264

\$  .  00

X1 ☐ DK

X2 ☐ Ref. – SKIP to 4a

– SKIP to 4a

- d. If I were to call back later, would you be able to provide me with an estimate of the amount? (This information is especially important for the purposes of this survey.)**

8266

1 ☐ Yes – Mark Callback Summary and Reminder Card, Item 16

2 ☐ No

NOTES

TOPICAL MODULES

## Section 4 – TOPICAL MODULES (Continued)

### Part A – SELECTED FINANCIAL ASSETS (Continued)

4a. Does . . . have a KEOGH account in . . . 's OWN name?

8284

1 ☐ Yes

2 ☐ No

X1 ☐ DK

X2 ☐ Ref.

} SKIP to 5a

b. For how many years has . . . contributed to . . . 's KEOGH account?

8286

Years

X1 ☐ DK

X2 ☐ Ref. – SKIP to 5a

c. As of (Read last day of reference period), what was the total balance or market value of assets in . . . 's KEOGH account(s)?

8288

\$

. 00

– SKIP to 5a

X1 ☐ DK

X2 ☐ Ref. – SKIP to 5a

d. If I were to call back later, would you be able to provide me with an estimate of the amount? (This information is especially important for the purposes of this survey.)

8290

1 ☐ Yes

2 ☐ No

– Mark Callback Summary and Reminder Card, Item 17

5a. Does . . . have any life insurance? (Include group policies provided by employers.)

8308

1 ☐ Yes

2 ☐ No

X1 ☐ DK

X2 ☐ Ref.

} SKIP to Statement B, page 58

b. What is the FACE VALUE of ALL life insurance policies that . . . has?

8310

\$

. 00

X1 ☐ DK

X2 ☐ Ref.

c. What types of life insurance does . . . have – is it "term insurance", "whole life", or does . . . have both of these types?

8312

1 ☐ Term only

2 ☐ Whole life only

3 ☐ Both types

X1 ☐ DK

NOTES

## Section 4 – TOPICAL MODULES (Continued)

### Part B – MEDICAL EXPENSES AND WORK DISABILITY

**STATEMENT B** → These next questions concern payments that . . . may have made last month for medical bills for himself/herself or his/her family.

**1. During (Read last month), did . . . pay any of the following:**

- |  |             |                                |                               |                                |
|--|-------------|--------------------------------|-------------------------------|--------------------------------|
| a. Doctor bills? .....                       | <b>8400</b> | 1 <input type="checkbox"/> Yes | 2 <input type="checkbox"/> No | x1 <input type="checkbox"/> DK |
| b. Dentist bills? .....                      | <b>8402</b> | 1 <input type="checkbox"/> Yes | 2 <input type="checkbox"/> No | x1 <input type="checkbox"/> DK |
| c. Hospital bills? .....                     | <b>8404</b> | 1 <input type="checkbox"/> Yes | 2 <input type="checkbox"/> No | x1 <input type="checkbox"/> DK |
| d. Expenses for prescription medicine? ..... | <b>8406</b> | 1 <input type="checkbox"/> Yes | 2 <input type="checkbox"/> No | x1 <input type="checkbox"/> DK |

**CHECK ITEM T3**

Is one or more "Yes" boxes marked in item 1?

- 8408** 1 ☐ Yes  
2 ☐ No – SKIP to Check Item T4

**2. Not counting amounts already reported by another family member or amounts that will be reimbursed by insurance, how much did . . . pay for medical expenses in the month of (Read last month)?**

**8410** \$   . 00  
x1 ☐ DK  
x2 ☐ Ref.

**CHECK ITEM T4**

Refer to cc item 24.  
What is . . . 's age?

- 8412** 1 ☐ 15 years old – SKIP to Check Item T8  
2 ☐ 16 to 67 years old  
3 ☐ 68 years old or older – SKIP to Check Item T8

**CHECK ITEM T5**

Refer to item 18a on page 7.  
What is marked in item 18a?

- 8413** 1 ☐ Item 18a is blank  
2 ☐ "Yes" in item 18a – SKIP to 3a  
3 ☐ "No" in item 18a – Skip to Check Item T8

**STATEMENT C** → Now I want to ask about any health or physical condition . . . may have that affected . . . 's ability to work.

**CHECK ITEM T6**

Refer to cc item 47.  
Is "Disabled" (code 171) marked on the control card for . . . ?

- 8416** 1 ☐ Yes  
2 ☐ No – SKIP to 3b

**3a. We have recorded that . . . 's health or condition limits the kind or amount of work . . . can do. Is that correct?**

- 8418** 1 ☐ Yes – SKIP to Check Item T7  
2 ☐ No – SKIP to Check Item T8

**b. Does . . . have a physical, mental, or other health condition which limits the kind or amount of work . . . can do?**

- 8420** 1 ☐ Yes – Mark "171" on ISS  
2 ☐ No – SKIP to Check Item T8

**CHECK ITEM T7**

Is "Worked" (code 170) marked on the ISS?

- 8422** 1 ☐ Yes – SKIP to Check Item T8  
2 ☐ No

**4a. Does . . . 's health or condition prevent . . . from working at a job or business?**

- 8424** 1 ☐ Yes  
2 ☐ No – SKIP to Check Item T8

**b. Has . . . been prevented from working for the past 12 months or longer?**

- 8426** 1 ☐ Yes – SKIP to Check Item T8  
2 ☐ No

**c. Is it likely that . . . will be able to work at some time in the next 12 months?**

- 8428** 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

**Go to Check Item T8**

NOTES





# Section 4 - TOPICAL MODULES (Continued)

## Part C - REAL ESTATE, SHELTER COSTS, DEPENDENT CARE, AND VEHICLES (Continued)

7a. Last month, did anyone here pay for the care of a child or a disabled person so that a household member could work, attend training, or look for a job?

- 8562 1 ☐ Yes  
2 ☐ No - SKIP to Check Item T12

b. What was the total cost of these care arrangements for the month of (Read last month)?

8564 \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

### CHECK ITEM T12

Refer to cc items 16a and 16b.  
Is this residence in a public housing project, is it subsidized, or is it neither public nor subsidized?

- 8658 1 ☐ In a public housing project } SKIP to 9a  
2 ☐ Subsidized  
3 ☐ Neither public nor subsidized

8a. Does . . . or anyone else in this household own any (other) real estate such as a vacation home or undeveloped lot? Exclude rental property previously reported or rental property attached to or located on the same land as . . . 's own residence.

- 8660 1 ☐ Yes  
2 ☐ No } SKIP to 9a  
x1 ☐ DK

b. Which persons in this household are the owners of this (these) property(ies)?

Person No. Name  
8662     
8664

c. What is the total value of (Read persons' names) equity in this (these) property(ies)? (By equity, we mean the amount that could be obtained by selling the property and paying off any debts.)

8666 \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

Count only share owned by household members.

9a. Does anyone in this household own a car, van, or truck, excluding recreational vehicles (RV's) and motorcycles?

- 8714 1 ☐ Yes  
2 ☐ No - SKIP to 10a

b. How many cars, trucks, or vans are owned by members of this household?

8716  Number of motor vehicles

(Ask items 9c-9g for vehicle 1 and then return to 9c for additional vehicles.)

c. Who is (are) the owner(s) of the (newest, next newest) motor vehicle?

	Vehicle 1	Vehicle 2	Vehicle 3
Person No.	8718 <input type="text"/> <input type="text"/> <input type="text"/>	8720 <input type="text"/> <input type="text"/> <input type="text"/>	8722 <input type="text"/> <input type="text"/> <input type="text"/>
Name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Person No.	8724 <input type="text"/> <input type="text"/> <input type="text"/>	8726 <input type="text"/> <input type="text"/> <input type="text"/>	8728 <input type="text"/> <input type="text"/> <input type="text"/>
Name	<input type="text"/>	<input type="text"/>	<input type="text"/>

d. What is the year, make, and model of this vehicle?

	Vehicle 1	Vehicle 2	Vehicle 3
Year	8730 <input type="text"/> 1 <input type="text"/> 9 <input type="text"/>	8732 <input type="text"/> 1 <input type="text"/> 9 <input type="text"/>	8734 <input type="text"/> 1 <input type="text"/> 9 <input type="text"/>
x1 <input type="checkbox"/> DK			
PGM 8 Make	8735 <input type="text"/>	8737 <input type="text"/>	8739 <input type="text"/>
x1 <input type="checkbox"/> DK	8736 <input type="checkbox"/>	8738 <input type="checkbox"/>	8740 <input type="checkbox"/>
Model	8741 <input type="text"/>	8743 <input type="text"/>	8745 <input type="text"/>
x1 <input type="checkbox"/> DK	8742 <input type="checkbox"/>	8744 <input type="checkbox"/>	8746 <input type="checkbox"/>
OFFICE USE ONLY	PGM 7 <input type="text"/>	PGM 7 <input type="text"/>	PGM 7 <input type="text"/>
	8748 <input type="text"/>	8750 <input type="text"/>	8752 <input type="text"/>

# Section 4 – TOPICAL MODULES (Continued)

## Part C – REAL ESTATE, SHELTER COSTS, DEPENDENT CARE, AND VEHICLES (Continued)

	Vehicle 1	Vehicle 2	Vehicle 3
<b>9e. Is this vehicle owned free and clear, or is there still money owed on it?</b>	<b>8754</b> 1 <input type="checkbox"/> Money owed 2 <input type="checkbox"/> Free and clear } <i>SKIP to 9g</i> x1 <input type="checkbox"/> DK	<b>8756</b> 1 <input type="checkbox"/> Money owed 2 <input type="checkbox"/> Free and clear } <i>SKIP to 9g</i> x1 <input type="checkbox"/> DK	<b>8758</b> 1 <input type="checkbox"/> Money owed 2 <input type="checkbox"/> Free and clear } <i>SKIP to 9g</i> x1 <input type="checkbox"/> DK
<b>f. How much is currently owed for this vehicle?</b>	<b>8760</b> \$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK – Probe x2 <input type="checkbox"/> Ref.	<b>8761</b> \$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK – Probe x2 <input type="checkbox"/> Ref.	<b>8762</b> \$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK – Probe x2 <input type="checkbox"/> Ref.
<b>g. Is this vehicle used primarily for either business purposes or for the transportation of a disabled person?</b>	<b>8763</b> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<b>8764</b> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<b>8765</b> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
<b>CHECK ITEM T13</b> Is there another vehicle which has not been asked about?	<b>8766</b> 1 <input type="checkbox"/> Yes – Ask 9c for next vehicle 2 <input type="checkbox"/> No – Go to 10a	<b>8768</b> 1 <input type="checkbox"/> Yes – Ask 9c for next vehicle 2 <input type="checkbox"/> No – Go to 10a	Go to 10a
<b>10a. Does anyone in this household own another kind of vehicle, not used for any business, such as a motorcycle, boat, or recreational vehicle?</b> Mark (X) all that apply.	<b>8770</b> 1 <input type="checkbox"/> Motorcycle <b>8772</b> 2 <input type="checkbox"/> Boat <b>8774</b> 3 <input type="checkbox"/> Recreational vehicle (RV) <b>8776</b> 4 <input type="checkbox"/> Other – Specify _____ <b>8778</b> 5 <input type="checkbox"/> No – SKIP to Check Item P1, page 62		
Ask items 10b–10e for each category of vehicle.	Category 1	Category 2	
<b>b. Who is (are) the owner(s) of the</b> (Read first/second category marked in 10a)?	Person No. Name <b>8780</b> <input type="text"/> <input type="text"/> <input type="text"/> _____ Person No. Name <b>8784</b> <input type="text"/> <input type="text"/> <input type="text"/> _____	Person No. Name <b>8782</b> <input type="text"/> <input type="text"/> <input type="text"/> _____ Person No. Name <b>8786</b> <input type="text"/> <input type="text"/> <input type="text"/> _____	
<b>c. If this vehicle were sold, what would it sell for in its present condition?</b>	<b>8788</b> \$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK – Probe x2 <input type="checkbox"/> Ref. – SKIP to Check Item T14	<b>8790</b> \$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK – Probe x2 <input type="checkbox"/> Ref. – SKIP to Check Item P1, page 62	
<b>d. Is (are) this (these) vehicle(s) owned free and clear, or is there still money owed on it (them)?</b>	<b>8792</b> 1 <input type="checkbox"/> Money owed 2 <input type="checkbox"/> Free and clear } <i>SKIP to Check Item T14</i> x1 <input type="checkbox"/> DK	<b>8794</b> 1 <input type="checkbox"/> Money owed 2 <input type="checkbox"/> Free and clear } <i>SKIP to Check Item P1, page 62</i> x1 <input type="checkbox"/> DK	
<b>e. How much is currently owed for this (these) vehicle(s)?</b>	<b>8796</b> \$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK – Probe x2 <input type="checkbox"/> Ref.	<b>8798</b> \$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK – Probe x2 <input type="checkbox"/> Ref.	
<b>CHECK ITEM T14</b> Is there another vehicle which has not been asked about?	<b>8800</b> 1 <input type="checkbox"/> Yes – Ask 10b for next vehicle 2 <input type="checkbox"/> No – Go to Check Item P1, page 62	Go to Check Item P1, page 62	
<b>NOTES</b>			